## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I												
			(Column 1) (Column 2)					SMALL ENTITY TYPE				NAHT F
TOTAL CLAIMS			1							OR T		ENTITY
FOR			NUMBER FILED		AU 11/05/0 51/50			RATE	FEE	-	RATE	FEE
╟─		ADIC CLANC			NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00
		ABLE CLAIMS	minus 20≈ *					X\$ 9=	1	OR	X\$18=	
-	DEPENDENT C		( minus 3 = *					X43=		OR	X86=	
M	ULTIPLE DEPE	NDENT CLAIM F	RESENT					4.5	1	107		
* 11	the difference	e in column 1 is	ero, enter	"0" in (	column 2	l	+145=	<u> </u>	OR	+290=		
								TOTAL	L	OR	TOTAL	170.00
	3-33 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	00	OTHER	
٦	l ·	CLAIMS	HIGHEST			(Column 3)		JIIMLL	ADDI-	OR I	SMALL	
Ę		REMAINING	!	NUMB PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL
	Total	AMENDMENT	Minus	PAID F	OR	<b></b>	-	<del></del>	FEE		<u> </u>	FEE
AMENDMENT A	Independent	· /	Minus V	Unh	Q	=		X\$ 9=		OR	X\$18=	
Ž		NTATION OF M	1	PENDENT	CLAIM	<u>                                     </u>		X43=		OR	X86=	}
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL			TOTAL	
		(Column 1)		(Colum	ın 21	(Column 3)	A	ODIT. FEE	L	OR,	ADDIT. FEE	· · · · · · · · · · · · · · · · · · ·
8		CLAIMS REMAINING		HIGHE	ST .		lr		ADDI-	•	<del></del>	ADDI
2	ł	AFTER		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL	·	RATE	ADDI- TIONAL
	Total	AMENDMENT	Minus	PAID F	OR		-		FEE	ŀ		FEE
AMENDMENT	Independent	-	Minus	***		=		X\$ 9=		OR	X\$18=	
¥		NTATION OF MU			CLAIM			X43=		OR	X86=	
							· [	+145=		OR	+290=	
	•										TOTAL	<del>`</del>
		(Column 1)	•	(Cal	- O'	(Oalvers at	Al	DDIT. FEE		OR ,	ADDIT. FEE	
	\	(Column 1) CLAIMS		(Colum HIGHE		(Column 3)	_					
C)		REMAINING AFTER		NUMBI PREVIOU		PRESENT EXTRA		RATE	ADDI- TIONAL	ŀ	RATE	ADDI- TIONAL
<u> </u>		AMENDMENT		PAID F			L		FEE		11/12	FEE
AMENDMENT	Total		Minus .	**		=		X\$ 9=		OR	X\$18≐	1
₹	Independent		Minus	***		=	一	X43=		.	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										+290=	•	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
T	he "Highest Numb	nber Previously Pai per Previously Paid	a For IN THIS For (Total or	SPACE is i Independen	ess than t) is the t	3, enter "3." highest number			opriate box			
												1